



ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health

Acute Care

I. Center Identification

Organization Name: MUNSTER SPECIALTY SURGERY CENTER

Street Address: 9200 Calumet Ave

City: Munster

County: Lake

ASC Web Address:

Fiscal Year: 2012

Accredited: ☐ Yes ☒ No

Name of Accrediting Body: AAAHC--pending survey

Deemed Status: ☐ Yes ☒ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

II. Identification of Surgical Resources

| | |
|---------------------------|---|
| Number of operating rooms | 2 |
| Number of procedure rooms | 1 |

III. Utilization Statistics

| | | |
|--|--------------------|----------------------|
| A. Total Patients and Procedures | | |
| Time Period | Number of Patients | Number of Procedures |
| Persons Served in twelve-month period | 30 | 31 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 29881 | 9 | |
| 62310 | 4 | |
| 62290 | 2 | |
| 22551 | 2 | |
| 28296 | 2 | |
| 27446 | 1 | |
| 28122 | 1 | |

| | |
|-------|---|
| 28285 | 1 |
| 28755 | 1 |
| 29823 | 1 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 0 |
|--|---|